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PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE e required to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Redu **Application Number** 10/044,675 TRANSMITTAL Filing Date 1-10-2002 First Named Inventor **FORM** Sinn Art Unit 3652 **Examiner Name** Keenan (to be used for all correspondence after initial filing) Attorney Docket Number 0291-0007 Total Number of Pages in This Submission

Total Name of City Space in Time of California										
ENCLOSURES (Check all that apply)										
√		smittal Form		Drawin Licensi	g(s) ing-related Papers			After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences		
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks			e Address		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):			
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Firm Name		COOK, ALEX, McFARRON, MANZO, CUMMINGS & MEHLER, LTD.								
Signature		Bail Mhus								
Printed name		DAVID M. MUNDT								
Date		January 31, 2005				Reg. No.	41,207			
										

Typed or printed name

MARGARE DAGGS

Date

January 31, 2005

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F	or FY 20	005	First Named Inventor Sin		Sinn	inn							
Applicant claims sm	all entity status	See 37 CFR 1 27	Examiner Name Keer			nan							
		60.00		Art Unit 3652									
TOTAL AMOUNT OF PA	AYMENT (\$)	60.00		Attorney Docket No. 0291-000			7						
METHOD OF PAYMENT (check all that apply)													
Check Credit Card Money Order None Other (please identify):													
✓ Deposit Account	Deposit Account	Number: <u>50-1039</u>		Deposit Ac	count Na	me: <u>Cook</u>	Alex, e	et al.					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
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FEE CALCULATION													
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES													
Application Type	Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee	Small (\$) Fee		Fee	es Paid (\$)				
Utility	300	150	500	250	200								
Design	200	100	100	50	130								
Plant	200	100	300	150	160								
Reissue	300	150	500	250	600								
Provisional	200	100	0	0 0) (0		 				
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues) Small Entity Fee (\$) Fee (\$) 25 25 200 100													
Multiple dependent Total Claims	Extra Clain	ns Fee (\$)	Fee	Paid (\$)				ependent					
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- 3 or HP = HP = highest number of in			= an 3.										
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer													
listings under 37	CFR 1.52(e))	, the application	size fee	e due is \$250 (\$	125 fo								
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets													
- 100 = /50 = (round up to a whole number) x =													
Other (e.g., late filing surcharge): Petition for extension of time \$60.00													
SUBMITTED BY													
Signature	Wilm	71		Registration No.	41,207		Telepho	ne (312)	984-0144				
Name (Print/Type) DAVID M. MUNDT (Attorney/Agent) 41,207 (512) 954-5144													

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